

INDIANA DEPARTMENT OF TRANSPORTATION

100 North Senate Avenue Room N955 Indianapolis, Indiana 46204-2249

(317) 232-5058 FAX: (317) 233-3055

| | DATE: | |
|---|--|--|
| | PROJECT: | |
| | PARCEL: | CODE: |
| Dear | | |
| This is to advise you that on Transportation initiated negotiations for the p This le | property which you rent | the Indiana Department of at |
| initiation of negotiations. There are certain relocation payment. Payments to which you time to allow you to remove your personal relocation payments must be submitted with the displacement site. | are entitled will be m property from the righ | ade available in sufficient ht-of-way. All claims for |
| A rental assistance payment has been computyou in renting a comparable replacement of available comparable Mobile Home rentable the difference between the amount you passe, and sanitary replacement Mobile Home pay for rent plus utilities at your present Moamount. | Mobile Home lot, shou determined in an analy al lots. The actual renta ay for rent and estimate to lot over a 42 month p | ald you elect to rent your sis of rent and utility costs al assistance payment will ed utilities at your decent, period and the amount you |
| The Mobile Home lot located at available to rent if you so desire. It has been in accordance with federal regulations. The M.H. lot, for utility costs, equaling a total rent of used in computing the previously mentioned | rental price is \$ utilities, plus an estimat /month | /month for the red \$ /month a. The total rent has been |

Payments to which you are entitled will be made available in sufficient time to allow you to purchase or rent a decent, safe and sanitary replacement site. Please be advised that any person may appeal the State's edibility determination or the amount of the relocation entitlement by submitting a written appeal to the Relocation Unit within 60 days of the date of that determination.

| THIS IS NOT A NOTICE TO VACAT not require you to move from the property which is at least 90 days from the date of | |
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| Your cooperation in providing a modern to continues to be appreciated. | transportation system for the State of Indiana |
| | Sincerely, |
| | Relocation Specialist |
| Please acknowledge receipt of this letter v | with your signature below: |
| | Relocatee |
| | Date |